

STATE OF NEW HAMPSHIRE

Honorarium or Expense Reimbursement Report (RSA 15-B)



Type or Print all Information Clearly:

Name: Michael S. DeLucia Work Phone No. 271-1288
First Middle Last

Work Address: NH DEPARTMENT of Justice, 33 Capitol Street, Concord NH 0330

Office/Appointment/Employment held: DIRECTOR of CHARITABLE TRUSTS / SENIOR ASS'T. ATTORNEY GENERAL

List the full name, post office address, occupation, and principal place of business, if any, of the source of any reportable honorarium or expense reimbursement. When the source is a corporation or other entity, the name and work address of the person representing the corporation or entity in making the honorarium or expense reimbursement must be provided in addition to the name of the corporation or entity.

Source of Honorarium or Expense Reimbursement:

Name of source: _____
First Middle Last

Post Office Address: _____

Occupation: _____

Principal Place of Business: _____

RECEIVED

JAN 26 2009

NEW HAMPSHIRE
DEPARTMENT OF STATE

If source is a Corporation or other Entity:

Name of Corporation or Entity: NATIONAL Association of Attorneys General/Columbia Law School

Name of Corporate/Entity Representative: RACHEL TEITELBAUM, Administrative Coordinator

Work Address of Representative: Columbia Law School, 435 W. 116 St., Box B-26, NY, NY 10027

Food and/or beverages consumed pursuant to RSA 15-B:6, II with value over \$25.00 ☐

Value of Honorarium: _____ Date Received: _____ If exact value is unknown, provide an estimate of the value of the gift or honorarium and identify the value as an estimate. ☐ Exact ☐ Estimate

Value of Expense Reimbursement: \$813 Date Received: 1/24/09 A copy of the agenda or an equivalent document must be attached to this filing. ☒ Exact ☐ Estimate

Briefly describe the service or event this Honorarium or Expense Reimbursement relates to:

Attorney General conference/training on fraud in charitable sector.

"I have read RSA 15-B and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief."

Michael DeLucia
Signature of Filer

January 26, 2009
Date Filed

9/07

RSA 15-B:9 Penalty. Any person who knowingly fails to comply with the provisions of this chapter or knowingly files a false report shall be guilty of a misdemeanor.

Return to: Secretary of State's Office, State House Room 204, Concord, NH 03301



NATIONAL ATTORNEYS GENERAL
TRAINING & RESEARCH INSTITUTE



COLUMBIA LAW SCHOOL

National State Attorneys General Program

ITINERARY
Charities Fraud Conference
January 22-24, 2009

Th. January 22:

4:00pm-4:30pm
4:30 pm- 6:00pm

6:30pm-8:00pm

Conference Check-in Jerome Greene Hall (JG) 107
Charities Primer: Preliminary Working Session for Assistant Attorneys General & Staff only
Evening reception for Assistant Attorneys General & Staff, Charities Project Advisory Board members and all speakers
Lerner Hall, Satow Room
Dinner on your own

Fri. January 23:

8:00-8:30am
8:30- 9:45am
9:15am
12:45-2:15pm
2:15pm
5:45pm -7:30pm

Conference Check-in JG 103
Overview Session
Plenary Session
Luncheon: Annex, Jerome Greene Hall
Afternoon Sessions
Reception for all attendees: Amsterdam Cafe
Dinner on your own

Sat. January 24:

8:30-9:00am
9:00am
9:45am
12:30pm-2:00pm
2:00pm

Session for Assistant Attorneys General & Staff only
Conference Check-in JG 701, Case Lounge
Continental Breakfast:
Session Begins
Working Lunch
Conference concludes